Cost			For Republic 20 SERVIC								
THE UNITED STATES, Dr., Payee's Account No. Chayees Charges Ch	U. S. <u>Cos</u>	T REIMBURSA						-	PA	ID BY	
The United States, Dr., Payee's Account No. (Payee) (Chayee) (Cost Per Dollars Cost Principles of Payee instance of the Cost of Payee instance of the Chayee i	Voucher pres	pared at	, ,	•	·			_	Engly	+-1	
To								 Ed.	SADC -	and the second	
Clay Clay Clay Clay Clay Clay Clay Clay			· ·					SHIP SECTION	COPY	OF 2	and the same
No. and Date of Order of Service Center description, item number of centract or Federal supply conditions and other information deemed necessary) QUANTITY Cost Per Dollars Cost	To		(Pa	yee)				-	The second of the second of		
Cost		(Addr	ess)	(City)	()	State)		_			
PAYMENT: Complete Partial Use continuation sheet(s) if necessary Shipped from to Weight Government B/L No. Total 1, 142 1 I certify that the above bill is correct and just and that payment has not been received. STATINTL (Sign original only) Date 4/4/58 *Pave Side continuation sheet(s) if necessary Title (Sign original only) Amount verified; correct for // ///2 4 Contract No. 9-/0/ Date Req. No. Date Invoice Rec'd. Pursuant to authority vested in me, I certify that this account is correct and proper for payment. † Approved for \$			ART (Enter description, ite schedule, and ot	ICLES OR SERVICE m number of contra- her information deep	S ct or Federal s ned necessary)	upply	QUANTITY				1 -
PAYMENT: Complete Partial Use continuation sheet(s) if necessary Shipped from to Weight Government B/L No. Total 1,1142 I certify that the above bill is correct and, just and that payment has not been received. STATINTL (Sign original only) Date 14/4/58		_		·				Cost	Per	Dollars	Cts.
Complete Partial Use continuation sheet(s) if necessary Shipped from to Weight Government B/L No. Total 1,142. I certify that the above bill is correct and just and that payment has not been received. STATINTL (Sign original only) Date 4/4/58 *Pavee Date Da			Cost							1,14%	2.43
I certify that the above bill is correct and just and that payment has not been received. STATINTL (Sign original only) Date 4/4/58 *Pavee Per	Complete Partial		Use cont	inuation sheet(s) if nec	cessary						
STATINTL (Sign original only) Date 4/4/58 *Pavec Differences	Shipped from	to	w _e	eight	Government			T .1'		1,142	2.43
STATINTL (Sign original only) Date 14/4/58 *Pavee bet required when a like certificate is made by payee on attached bill or bills) Per Title Signature or initials) Contract No. A-/o/ Date Req. No. Date Invoice Rec'd. Pursuant to authority vested in me, I certify that this account is correct and proper for payment. † Approved for \$ (Authorized Certifying Officer) ORIGINAL ONLY Title Date The reverse of this form must be executed when purchases are made or services secured without written agreement in any form	I certify that the	above bill is correct	and just and that paymen	t has not been receive	ed.]	1.0	1000	1	e para e como e	
Per	ST	ATINTL	(Sign original only)			Differen	ces				
Per Title Signature or initials) Amount verified; correct for Signature or initials) Pursuant to authority vested in me, I certify that this account is correct and proper for payment. † Approved for \$	1 1 1-0										
Per	Date 4/4/58	*Pavce	not required when a like cer	tificate is made by payee on att	ached bill or bills)	Amou	ant verified;	correct for	·	1,142	ر 4
Pursuant to authority vested in me, I certify that this account is correct and proper for payment. † Approved for \$	Per					(Sign	ature or init	ials) U	<i></i>		
† Approved for \$							Date	I	nvoice Rec'	d	
SIGN ORIGINAL ONLY Title Date THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM		•	•	correct and proper f							
ORIGINAL ONLY Title	† Approved for \$			CION	†		(Authoria	zed Certify	ng Officer)		
Title Date THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM	Ву			ORIGINAL	Title						an a
THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN ACREEMENT IN ANY FORM				ONLI	ъ.						
	Title			EN PURCHASES ARE MADE						*******	
ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)									· · · · · · · · · · · · · · · · · · ·		
		ACCOUN	TING CLASSIFICATION	(Appropriation Sym	bol must be si	nown; oth	er classificat	ion option	nal)		
					177.2						
		N	dated		for \$			{on Tre	asurer of the	United States in	favor o
Check No for \$ for Treasurer of the United States in favor and by {		No		,				I TIR VAR	named above		

Standard Form No. 1035a—Revised Form prescribed by Comptroller General U S September Approved For Release 2000/64/19r: CWARDP64-00360R000600010103-1 September Approved For Release 2000/64/19r: CWARDP64-00360R000600010103-1 Services Other Than Personal MEMORANDUM

o. and Date	Date of Delivery	ARTICLES OR SERVICES	OUAN-	UNIT PRICE		AMOUNT	
of Order	or Service	(Enter description, item number of contract or Federal supply sched and other information deemed necessary)	lule, QUAN-	Cost	Per	Dollars	Cts
		·					
		Contract A-10/ Costs applicable					
-		to All Systems					
		Direct Costs Properly Chargeable to Contract A-101 for the period	o				
		3/24 thru 3/30/58					
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		STATINTL					
		Research & Development					
		Development	-			10	tal
bor for	Week En	ding March 30, 1958			1		
		STATINTL					
erhead	for Comm	unications Division					
mputed	at inter	im rates as follows:					
resear	cu & bea	elopment -					
her Cos	ts - Per	schedule attached					
132 000	00 - 101	schedule accached					
tal Lab	or, Over	nead and Other Costs					
are A &	ense com	outed at interim					
ce vi Cido							
te of	7						
te of							
te of	ts	STATINTL				\$ <u>1,142</u> .	<u>43</u> *
te of	ts	STATINTL				\$ <u>1,142</u> .	<u>43</u> *
te of	ts	STATINTL				\$ <u>1,142</u> .	<u>43</u> *
te of	ts	STATINTL				\$ <u>1,142.</u>	<u>43</u> *
te of	ts	STATINTL				\$ <u>1,142.</u>	<u>43</u> *
te of	ts	STATINTL		·		\$ <u>1,142</u> .	<u>43</u>
te of	ts	STATINTL				\$ <u>1,142.</u>	<u>43</u>
te of	ts	STATINTL		·		\$ <u>1,142.</u>	<u>43</u>

Approved For Release 2000/04/11 : CIA-RDP64-00360R000600010103-1 29250 29250 29250 29250 NET AMOUNT Work Order CHARGE DISTRIBUTION M.J.O. S.D. 10 5047 12501 Account 8 Int. Sub. COST CENTER 40 Maj. 52 ACCOUNTS PAYABLE CODE Class
Cost
TR.
TR. DISCOUNT GROSS 25 Vendor Number 10 40 CHECK PURCHASE ORDER 25116 44245 INVOICE NUMBER No. Mo. Day 31 03 04 Approved For Release 2000/04/11 : CIA-RDP64-00360®000600010103-1

DISTR

WEEKLY DET

THE RAMO-WOOLDRIDGE CORPORATION

Approved For Release 2000/04/11 : CIA-RDP64-00360R000600010103-1 120 ** 120 ** 120 ** 87250 \$73.70 NET AMOUNT Work Order CHARGE DISTRIBUTION ~ M.J.o. S.D. 04 5051 Account 12501 30 Sub. COST CENTER Ħ. 2.1 Ä. 25 Tax Class Cost Element TR, TR, DISCOUNT GROSS Vendor Number 1883 04 01 Mo. Day CHECK PURCHASE IER3-58 INVOICE 8 Mo. Day Yr. FORM STL - 660 ë BATCH 03 40 Š Approved For Release 2000/04/11 : CIA-RDP 64-00360R0 00600 010 103-1

DISTR

WEEKLY DET

ACCOUNTS PAYABLE

THE RAMO-WOOLDRIDGE CORPORATION